PART B - FEE(S) TRANSMITTAL

Complete and send this forms together with applicable fee(s), to: Mail MAR 3 0 2005					Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450		
	<u>\$</u> /	<u> </u>	or <u>l</u>				
INSTRUCTIONS This for appropriate. All furnier the indicated unless corrected maintenance fee notification	orm strong be used for transless of the below or directed otherwise ons.	Patent, advance of in Block 1, by (a	JE FEE and rders and noti a) specifying	PUBLICATION FE fication of maintena a new correspondence	E (if require ince fees wil ce address; a	d). Blocks I through 5 s I be mailed to the current nd/or (b) indicating a sep	should be completed where correspondence address as arate "FEE ADDRESS" for
CURRENT CORRESPONDEN	CE ADDRESS'(Note: Use Block 1 for	any change of address)		Note: A cer Fee(s) Trans	rtificate of m	nailing can only be used for certificate cannot be used	or domestic mailings of the for any other accompanying ent or formal drawing, mus
021706 7	7590 03/10/2005			have its owr	n certificate	of mailing or transmission.	ent or formal drawing, mus
NOTARO AND	MICHALOS				Certi	ficate of Mailing or Trans	smission
100 DUTCH HILI	L ROAD			I hereby cer States Posta	rtify that this Il Service wit	Fee(s) Transmittal is bein th sufficient postage for fir	g deposited with the United st class mail in an envelope
SUITE 110 ORANGEBURG,	NV 10062 2100			addressed to transmitted	o the Mail ! to the USPT(Stop ISSUE FEE address O (703) 746-4000, on the o	g deposited with the United st class mail in an envelope above, or being facsimile date indicated below.
				(7)	nA /	MAINA	(Depositor's name)
1/2005 WABDELR3 0000		7	100	market	(Signature)		
C:1501 1400.00 OP				03.28.05			(Date)
C:1504	300.00 OP					0 00	
C:8001plication no.	FILING DA 969 OP	FIRST NAMED INVE			/	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/719,232 11/20/2003		David William Thor		ım Thomson		85170-4900	2204
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION	FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional NO		\$1400	0	\$300		\$1700	06/10/2005
EXAMINER		ART UNIT		CLASS-SUBCLA	LASS-SUBCLASS \$1,709.00		
BUECHNER, PATRICK M		3754		222-153060	<u> </u>	#1,10 1.5 C	
CFR 1.363).	ee address or indication of "F	•	-	ting on the patent fro		attorneys I NOTAR	O É MICHALOS
Address form PTO/SB/1	dence address (or Change of 22) attached.	Correspondence	_	OR, alternatively,			
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered attorney or agent) and the names of up to				
PTO/SB/47; Rev 03-02	·		isted, no r	ame will be printed.			
Number is required.	<u> </u>	E PRINTED ON 1			-		
Number is required. 3. ASSIGNEE NAME AND	D RESIDENCE DATA TO B s an assignee is identified be n 37 CFR 3.11. Completion		I THE PATENT	(print or type)		is identified below, the d	ocument has been filed for
Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN	D RESIDENCE DATA TO Be an assignee is identified be a 37 CFR 3.11. Completion	elow, no assignee of this form is NO	I THE PATENT data will appor T a substitute B) RESIDENC	(print or type)	f an assignee ent.		locument has been filed for
Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN	D RESIDENCE DATA TO B s an assignee is identified be n 37 CFR 3.11. Completion	elow, no assignee of this form is NO	I THE PATENT data will appor T a substitute B) RESIDENC	(print or type) ear on the patent. If for filing an assignment E: (CITY and STAT	f an assignee ent. E OR COUN		
PIO/SB/4/; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN DANIEL MONT	D RESIDENCE DATA TO Be an assignee is identified be a 37 CFR 3.11. Completion	elow, no assignee of this form is NO (B n Limited	I THE PATENT data will apper T a substitute B) RESIDENC	(print or type) ear on the patent. If for filing an assignment E: (CITY and STAT Glasglot	f an assignee ent. TE OR COUN	ited Kingd	'om
PIO/SB/4/; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN DANIEL MONT Please check the appropriate 4a The following fee(s) are	DRESIDENCE DATA TO B s an assignee is identified be n 37 CFR 3.11. Completion IEE TSomery & So e assignee category or catego	elow, no assignee of this form is NO (B CIMITED ries (will not be pr	ITHE PATENT data will apper T a substitute B) RESIDENC inted on the properties Payment of	(print or type) ear on the patent. If for filing an assignment E: (CITY and STAT G QSG O (atent): Individual Fee(s):	f an assignee ent. E OR COUN W W W ual	ITRY) LITED Kingol Poration or other private gra	
PIO/SB/4/; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN DANIEL MONT Please check the appropriate 4a. The following fee(s) are	DRESIDENCE DATA TO Be an assignee is identified be a 37 CFR 3.11. Completion IEE TSOMERY & SO e assignee category or catego enclosed:	elow, no assignee of this form is NO (B Climite) ries (will not be pr	THE PATENT data will apper T a substitute B) RESIDENC inted on the properties Payment of	(print or type) ear on the patent. If for filing an assignment E: (CITY and STAT G OSG O (atent): Individuation Fee(s): n the amount of the form	f an assignee ent. E OR COUN W W W ual Corp fee(s) is enclo	entry) In the different triple of the different triple of the private graphs of the private graphs of the different triple of triple	'om
PIO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN DANIEL MONT Please check the appropriate 4a. The following fee(s) are publication Fee (No see 1)	DRESIDENCE DATA TO Be an assignee is identified be 37 CFR 3.11. Completion IEE THOMPSOMERY & SO e assignee category or catego enclosed: small entity discount permittee	elow, no assignee of this form is NO (B Climite) ries (will not be pr	THE PATENT data will apport a substitute B) RESIDENC inted on the properties of the payment of t	in the amount of the fiby credit card. Form	f an assignee ent. E OR COUN Un ual Corp fee(s) is enclo PTO-2038 is	erry) In the difference of the private groupsed. In the difference of the private groupsed. In the difference of the private groupsed.	oup entity Government
Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN DANIEL MONT Please check the appropriate 4a. The following fee(s) are	DRESIDENCE DATA TO Be an assignee is identified be 37 CFR 3.11. Completion IEE THOMPSOMERY & SO e assignee category or catego enclosed: small entity discount permittee	elow, no assignee of this form is NO (B CIM; TED ries (will not be pr 4b	THE PATENT data will apport a substitute B) RESIDENC inted on the properties of the payment of t	ear on the patent. If for filing an assignment is considered to the patent of the formal states of the following t	f an assignee ent. E OR COUN Un ual Corp fee(s) is enclo PTO-2038 is	erry) In the difference of the private groupsed. In the difference of the private groupsed. In the difference of the private groupsed.	oup entity Government
PIO/SB/4/; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN DANIEL MONT Please check the appropriate 4a. The following fee(s) are Issue Fee Publication Fee (No s Advance Order - # of	DRESIDENCE DATA TO Be an assignee is identified be 37 CFR 3.11. Completion IEE THOMPSOMERY & SO e assignee category or catego enclosed: small entity discount permittee	elow, no assignee of this form is NO (B Climite) ries (will not be product)	THE PATENT data will apput a substitute B) RESIDENC inted on the po Payment of A check i Payment The Dire Deposit Accord	ear on the patent. If for filing an assignment is considered to the patent of the formal states of the following t	f an assignee ent. E OR COUN Un ual Corp fee(s) is enclo PTO-2038 is rized by char	oration or other private groupsed. s attached. rge the required fee(s), or	oup entity Government credit any overpayment, to opy of this form).

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Authorized Signature ___

Typed or printed name _

Registration No.